

**FOR OFFICE USE ONLY**

Account# _____ Deposit _____ Call Center# _____

Name: _____
Last First MPhone: _____
Home Phone Business Phone Cell Phone

E-mail: _____

TYPE OF REQUEST: **New Service** _____ (Complete Section A below & include copy of Driver's License)
(Please check one) **Disconnect Service** _____ (Complete Section B below)
Transfer Service _____ (Complete Section C below)

SECTION A**New Service**Service Address: _____
Street City/State Zip CodeMailing Address: _____
Street City/State Zip Code

Driver's License: State _____ Number: _____ Social Security#: _____

Date to Connect (Normal Business Day): _____

***The City of Frisco will bill you a \$75 deposit which will be refunded after 24 months
of good service history or upon disconnection of service.*

SECTION B**Disconnect Service**Service Address: _____
Street City/State Zip CodeForwarding Address: _____
Street City/State Zip Code

Date to Disconnect (Normal Business Day): _____

SECTION C**Transfer Service** (Only if moving from one Frisco Address to another)New Service Address: _____
Street City/State Zip Code

Date to Connect (Normal Business Day): _____

Previous Service Address: _____
Street City/State Zip Code

Date to Disconnect (Normal Business Day): _____

***For transfers, the City of Frisco will charge a \$10.00 transfer fee.*

CONFIDENTIALITY REQUEST_____ I hereby request confidentiality of my personal information by the City of Frisco's Utility
Billing Department.

_____ I hereby rescind my request for confidentiality.

SIGNATURE OF CUSTOMER_____
DATE

*** The 95 gallon Trash can and 95 gallon Recycle can will be provided for you and delivered
within 5 business days from your start date. Existing homes already have cans.*

**** All Delinquent Accounts will be sent to a Collection Agency ****

Fax: (972) 292- 5585**E-mail: utilitybilling@friscotexas.gov**